

INSTRUCTIONS

Amendments to Form ARRA-4 should be submitted on Form ARRA-4. Changes to the attachments **do not** require a Form ARRA-4, but only submit the attachment form as applicable.

Items 1- 3, are self-explanatory. Be sure to include area code and all ZIP codes.

Item 4, list address(es) at which a source of radiation may be used other than the address listed in item 3. If statewide, county wide, or citywide, please so designate. Leave blank if the same as item 3.

Item 5, please classify the facility according to the usage for which this application is being filed. If more than one usage of sources of radiation occurs at this facility a separate application should be filed for each usage. You may make copies of this form, if necessary.

Item 6, choose a facility subtype that best describes your facility.

Item 7, List the name and telephone number of the individual who is delegated responsibility for radiation control for the facility. If a committee has this responsibility, list the chairman and attach a list of the committee membership. In any case, an individual usually designated as the Radiation Safety Officer will have the day to day responsibility for the administration of the Radiation Safety Program of the facility. Changes to the Committee Membership or the Radiation Safety Officer may be sent to the Agency by letter or FAX.

Item 8, please indicate the legal structure of the applicant. **NOTE:** for all cases indicate the State, etc, under which the entity is organized and any Arizona Agent representing the entity.

Item 9, please sign and date the application. Send application to: ARRA; 4814 South 40th Street; Phoenix, AZ 85040.

If you have any questions, please write to the above address or call 602-255-4845 or FAX 602-437-0705.

PLEASE NOTE AN APPLICATION FOR A NEW RADIATION MACHINE FACILITY (NEVER REGISTERED/LICENSED BY THE APPLICANT) CANNOT BE PROCESSED UNTIL THE APPROPRIATE APPLICATION FEE IS RECEIVED. IN ACCORDANCE WITH R12-1-202 C., THE APPLICANT OF AN EXISTING REGISTERED OR LICENSED FACILITY IS NOT TO POSSESS OR USE UNREGISTERED/UNLICENSED EQUIPMENT FOR MORE THAN THIRTY DAYS. (NOTE: A SCHEDULE OF APPLICATION FEES CAN BE FOUND IN R12-1-1306)

No registration is complete unless the appropriate forms listing the equipment to be registered/licensed accompany this application. The following is a list of the appropriate forms to use when registering equipment.

<u>TYPE EQUIPMENT</u>	<u>ATTACHMENTS TO ARRA-4 APPLICATION</u>
Medical/Dental Diagnostic X-Ray units	ARRA-4X
Medical Therapy X-Ray (<1Mev)	ARRA-4XT
Medical Therapy X-Ray (\$1Mev)	ARRA-4PAT
Industrial Gauge	ARRA-4IG
Industrial Radiography (<1,000 kVp)	ARRA-4IR
Industrial Radiography (\$1Mev)	ARRA-4PAR
All other Particle Accelerators	ARRA-4PA
Mammography	ARRA-13
Non-Ionizing Application	ARRA-1004
Tanning	ARRA-1005
Radio Frequency	ARRA-1030
Nonionizing User	ARRA-1050
Laser	ARRA-1070
MRI	ARRA-1090